

## UNITED STATES DISTRICT COURT

DISTRICT OF \_\_\_\_\_

APPEARANCE

Case Number:

To the Clerk of this court and all parties of record:

Enter my appearance as counsel in this case for

I certify that I am admitted to practice in this court.

Date \_\_\_\_\_

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Bar Number \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip Code \_\_\_\_\_

Phone Number \_\_\_\_\_

Fax Number \_\_\_\_\_